<u> </u>	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 (application or Docket Number 1996) (b) 230400 65 166230400 600 2948													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN			
Ľ	OTAL CLAIMS	24					RATE	FEE	7	RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			24 minus 20=		• 4			X\$ 9=		OR	X\$18=	72		
INDEPENDENT CLAIMS			U minus 3 =					X40=		OR	X80=	80		
MŁ	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+135=		1	070		١	
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=	-	OR	+270=	862		
	CLAIMS AS AMENDED - PART II								<u> </u>	JOH	OTHER			
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	QR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N N	Total	.24	Minus	- 2	4	- Ô		X\$ 9=		OR	X\$18=			
AME	independent	· 4	Minus		4	<u> - 0</u>		X40=		OR	X80=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		. 272			
								+135= TOTAL		OR	+270=			
			. ·				A	DOIT. FEE		OR	ADDIT. FEE			
		(Column 1) CLAIMS		(Colur High	EST	(Column 3)			400)					
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Š	Total	•	Minus	24		= .		X\$ 9=		ОЯ	X\$18=			
AME	independent	<u> • </u>	Minus	***		-		X40≃		OR	X80=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=			
	•									OR	TOTAL			
		(Column 1)		(Colun	nn 2\	(Column 3)		DDIT. FEE			ADDIT. FEE			
ENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUME PREVIO PAID I	EST SER SUSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
AMENDMENT	Total	•	Minus	**			r	X\$ 9=	FEE	OR	X\$18=	FEE		
	Independent	•	Minus	***		-	-	X40=		•			٠	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.										OR	X80=			
• (1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** TOTAL OR ADDIT FOR													
	If the "Highest Nu	mber Previously Pa mber Previously Pak ber Previously Pak	id For in This	S SPACE to	less the	n 3. enter "3."		DDIT. FEE L	ropriate box		DOIT FEE			
	• .								•					

FORM PTO-875 (Rev. 8/00)